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THOMAS, KAYDEN

PAGE 01

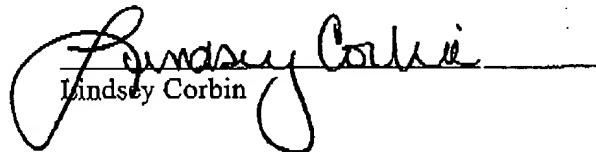
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UNDER 37 CFR §1.8**

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Date: 7-7-2006


Lindsey Corbin

In Re Application Of: Jordan

Art Unit: 2153

Serial No.: 09/943,836

Confirmation No.: 2808

Filed: 8/31/2001

Docket No. 190252-1940

For: **METHODS AND SYSTEMS FOR ATTACHMENT PROCESSING IN
ASSOCIATION WITH ELECTRONIC MESSAGES**

**Request for Continued Examination
Fee Transmittal
Credit Card Payment
Petition for Extension of Time
Response to Office Action**

TOTAL PAGES 10

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PTO/SB/17 (12-04v2)
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Effective as of 12/08/2004
Fees Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2006**Complete If Known**

Application Number	09/943,836
Filing Date	8/31/2001
First Named Inventor	Royce D. Jordan, Jr.
Examiner Name	Reilly, Sean M
Art Unit	2153
Attorney Docket No.	190252-1940

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$1240)
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METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify):
 Deposit Account Deposit Account Number: 20-0778 Deposit Account Name: Thomas, Kayden, Horstemeyer Risley, L.L.P.
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	Filing Fees		Search Fees		Examination Fees		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESSIVE CLAIM FEES

Fee Description	Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
Each claim over 20 (including Reissues)	-20 or HP =					Fee (\$)	Fee (\$)
Each independent claim over 3 (including Reissues)	HP = highest number of total claims paid for, if greater than 20					50	25
Multiple dependent claims						200	100
						360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
-20 or HP =						

HP = highest number of total claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 USC 41(a)(1)(G) and 37 CFR 1.16(s)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =	/50=	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	Fee Paid (\$)
Other: Request for Continued Examination, Two Month Extension of Time	\$1,240.00

SUBMITTED BY	Complete (if applicable)		
Signature		Registration No. 47,283	Telephone Number 770-933-9500
Name: (Print/Type)	Charles W. Griggers	Date:	July 7, 2006

This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 USC 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send to Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004

Fees Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**Fee Transmittal
For FY 2006** Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** **1240****Complete if Known**Application Number **09/943,836**Filing Date **8/31/2001**First Named Inventor **Royce D. Jordan, Jr.**Examiner Name **Reilly, Sean M.**Art Unit **2153**Attorney Docket No. **190252-1940****METHOD OF PAYMENT (check all that apply)** Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number **20-0778** Deposit Account Name: **Thomas, Kayden, Horstemeyer Risley, L.L.P.**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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under 17 CFR 1.16 and 1.17

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	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
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Provisional	200	100	0	0	0	0	0

2. EXCESSIVE CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small Entity Fee (\$)

50

25

Each independent claim over 3 (including Reissues)

200

100

Multiple dependent claims

360

180

Total ClaimsExtra ClaimsFee (\$)Fee Paid (\$)Multiple Dependent ClaimsFee (\$)Fee Paid (\$)

20 or HP =

HP = highest number of total claims paid for, if greater than 20

Indep. ClaimsExtra ClaimsFee (\$)Fee Paid (\$)

-3 or HP =

HP = highest number of total claims paid for, if greater than 3

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If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 USC 41(a)(1)(G) and 37 CFR 1.16(s)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =	/50=	(round up to a whole number) x =		

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Fee Paid (\$)

Other: Request for Continued Examination, Two Month Extension of Time

\$1,240.00

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Complete if applicable

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Charles W. Griggers

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